

#100-10-10-B

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BASE ISSUE FEE TRANSMITTAL

This form is provided in lieu of a formal transmittal and should be used for transmitting the Base Issue Fee. The sections 1A through 4 below must be completed as appropriate.

MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt, the Patent, the Notice of Balance of Issue Fee Due if appropriate, and advanced orders will be mailed to the addressee entered in section 1 at the left below, unless you direct otherwise by specifying the appropriate name and address in 1A below.

<p>1. ROBERT E. ARCHIBALD APPLIED PHYSICS LABORATORIES, JOHN HOPKINS ROAD, LAUREL, MD. 20810</p>	<p>2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Base Issue Fee to the application identified below.</p> <p>(Signature of person in interest of record) <i>Robert E. Archibald</i> (Date) <i>9/15/82</i></p> <p>Note: The Base Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.</p>
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SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	DATE MAILED	EXAMINER AND GROUP ART UNIT
06/034,155	04/27/79	642	06/29/82	JANDORSKI, F 335
First Named Applicant: FISCHELL, ROBERT E.				

TITLE OF INVENTION

(This may have been amended by Exam)

IMPLANTABLE, PROGRAMMABLE MEDICATION INFUSION SYSTEM

BASE FEE COMPUTATION	BASE FEE DUE	ATTY'S DOCKET NO.	CLASS - SUBCLASS	BATCH NO.
\$100 + 10 (for dwg. @ \$2 per sheet) + \$10 = 120	120	SPL33	12B-260.000	L32

<p>1A. Further correspondence to be mailed to the following:</p> <p>Robert E. Archibald, Esq. The Johns Hopkins University Applied Physics Laboratory Johns Hopkins Road Laurel, Maryland 20707</p>	<p>2B. For printing on the patent front page, list below the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed below, no name will be printed.</p> <p>1 <u>Robert E. Archibald</u></p> <p>2 <u>Marc A. Block</u></p> <p>3 <u>Samuel L. Sachs</u></p>
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<p>09/27/82 034155 2 106 100.00 CK</p> <p>09/27/82 034155 2 107 10.00 CK</p> <p>09/27/82 034155 2 108 10.00 CK</p> <p>09/27/82 034155 2 301</p> <p>3. ASSIGNMENT DATA (print or type)</p> <p>A. (1) <input type="checkbox"/> This application is NOT assigned. (2) <input checked="" type="checkbox"/> Assignment previously submitted to the Patent and Trademark Office. (3) <input type="checkbox"/> Assignment submitted herewith.</p> <p>B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).</p> <p>(1) NAME OF ASSIGNEE: <u>The Johns Hopkins University</u></p> <p>(2) ADDRESS: (City & State or Country) <u>Baltimore, Maryland 21218</u></p> <p>(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION: <u>Maryland</u></p>	<p>4. 5.00 CK</p> <p>The following fees are enclose: <input checked="" type="checkbox"/> Base fee <input checked="" type="checkbox"/> Advanced order <input type="checkbox"/> Assignment recording</p> <p>The following fees should be charged to deposit acc. no. _____ (PTOL-85c must be enclosed)</p> <p><input type="checkbox"/> Base fee <input type="checkbox"/> Advanced order <input type="checkbox"/> Assignment recording <input type="checkbox"/> Balance of Issue fee due, if any</p> <p>Number of advanced order copies requested <u>10</u> (must be for 10 or more copies)</p>
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